

SECTION: FOOD DELIVERY SYSTEM

SUBJECT: Food Instrument Receipt and Distribution

ITEM: *Distribution of Formula for Medical Conditions*



Policy

Local agency staff shall review requests for formula and issue formula for medical conditions (FMC) according to the following guidelines set forth by the State WIC Branch. The State WIC Branch retains the authority to determine which formulas are available to participants.

Authorization for coverage of FMC by WIC shall be for intervals of one to three months, and may be renewed when prescribed by a health care provider. Payment for FMC by WIC is secondary to payment by the participant's health care plan.

Mothers, who combination feed breast milk and formula shall be encouraged and supported to return to exclusive breastfeeding, unless medically contraindicated.

Basis for policy

7CFR 246.10 (C) (1-3)

Definitions

Contract formula is cow's milk or soy based infant formula intended for normal infants and is designated in the manufacturer's contract with the State WIC Branch. Two types of contract formula are available on food instruments:

- **Standard:** Cow's milk or soy based formula for normal term infants.
- **Specialized:** Formula that is slightly altered from standard milk based formula, but is used for normal term infants, such as a lactose free formula.

FMC is specially formulated and prescribed for infants, children and women, who experience intolerance to milk and soy products, and/or who have a medical or dietary problem that necessitates the use of an altered product to meet nutritional needs. FMCs are not included in the manufacturer's contract with the State WIC Branch.

Food Intolerance is an abnormal physiologic response to an ingested food. Reactions can be idiosyncratic, metabolic, pharmacologic or toxic, and span from hypersensitivity to anaphylaxis. Intolerance is one of the primary reasons for requesting a FMC.

Proper screening of formula for medical conditions

Local agency staff shall screen formula requests to rule out problems due to an error in dilution, handling or storage of formulas, and to assess for proper feeding practices. Screening includes documenting the names of the formula(s) tried, their duration and all reactions observed, as well as relevant medical and nutritional history. The “Screening and Medical Justification of Formula for Medical Conditions” forms (DHS 4143/4144) shall be used for screening. The RD shall screen and document the need for FMC at any age.

Approval guidelines for formula for medical conditions

Approval for a FMC requires:

- Screening and completion of the “Screening and Medical Justification of Formula for Medical Conditions” forms (DHS 4143/4144), and
 - A prescription from a health care provider, which indicates an infant, child or woman cannot tolerate the contract formula and a FMC is needed.
-

Approval guidelines for formula for medical conditions

In addition to the above steps, approval for a FMC requires determination by the RD that the formula is ineligible for third-party payment. The determination may require clarification of the participant’s health plan coverage of FMC that is based on a medical condition. The “Request for Formula for Medical Conditions” form (DHS 4150) shall be used to document health plan coverage and for requesting the FMC from the State WIC Branch. (Refer to the WIC Program Manual Appendix, 1000-50 for ordering procedures.) The local agency RD must confirm and document in ISIS that the participant is **not eligible** for, or has been **denied** coverage for the FMC from the following relevant payers:

- Medi-Cal program and/or Medi-Cal Managed Care Plan (when a documented “Share of Cost” is higher than the cost of the formula requested, WIC will provide the formula),
- California Children Services (CCS) program, or
- Regional Center (when a participant does not have Medi-Cal, a Regional Center may cover the formula or the social worker may assist the

participant with applying for third party coverage).

Note: Local agency staff may accept a verbal denial from the third party payer, but should receive and file a hard copy of the denial within one month.

**Approval
guidelines for
formula for
medical
conditions
(cont'd)**

Exception: If a participant is in the process of applying for any of the above, the RD may issue the FMC upon completing the approval process, for a duration of one month pending the results of the application process.

**Food
instrument or
formula
distribution**

Most infants, children and women who receive a FMC have a level three or four indicator of nutritional need and, therefore require monthly or bimonthly food instrument issuance in accordance with the local agency food issuance policy.

**Health care
provider's
prescription**

Health care providers with prescriptive authority, including the physician, nurse practitioner, physician assistant, osteopath and other medical practice specialists, such as, pediatric gastroenterologist, may prescribe a FMC.

The prescription may be on:

- Office letterhead,
- A prescription pad,
- The WIC pediatric referral form, or
- The "Screening and Medical Justification of Formula for Medical Conditions " forms (DHS 4143/4144).*

***Note: This form is highly recommended for this process, because it enhances communication between the provider and WIC.**

The prescription from the provider must include the following:

- Medical diagnosis that warrants the issuance of a FMC,
 - Recommended formula that is medically justified for the treatment of the stated diagnosis,
 - Feeding instructions that include recommended duration, amount, and mixing (when altered for a higher calorie formula), and
 - Signature and date of request.
-

**Honoring
the health care
provider's
prescription**

Within the State WIC Branch guidelines, local agency staff shall honor a health care provider's prescription for a FMC for a minimum of one month when the screening has been completed. However, when the prescription appears incorrect, illegible, incomplete or when the request of the parent/guardian differs from the prescription, the RD must obtain additional clarification from the health care provider (or his/her nursing staff) prior to issuing the formula. Upon clarification, the local agency shall request a correct prescription. One month of formula can be issued with a verbal order and documentation in Integrated Statewide Information System (ISIS). If a verbal or written order does not meet the State WIC Branch approval guidelines, food instruments for the formula shall not be issued.

Note: Local agency staff shall not change, ignore or modify a prescription without contacting and receiving approval from the provider who made the order.

**Transition off
formula for
medical
conditions**

When clinical indicators for use of a FMC have resolved and the parent/guardian requests a change to contract formula prior to expiration of the three month prescription, the RD must contact the prescribing health care provider (or work through his/her nursing staff) to obtain a verbal or written approval to change the formula. The change shall be documented in ISIS. If the RD is unable to contact the health care provider or his/her nursing staff, one more month of the FMC shall be provided.

**Extension of
the formula
request**

The RD shall verify the continuing need for an extension of a FMC by repeating the screening and approval process, which includes obtaining an updated prescription from the health care provider every three months. For FMC, an additional denial of payment from the same payment source is not needed, unless the health care plan has changed.

**Children who
require
formula**

Contract Formula: Any formula request beyond twelve months of age shall be treated as a FMC request. Refer to Proper Screening of FMC and Approval of FMC sections. Third-party payment, however, is not applicable to the payment of contract formulas.

Exception: Contract soy formula may be issued for six month intervals in the following cases:

- **An infant has a well-documented and chronic cow's milk allergy or medical diagnosis, and/or**
- **Cultural and religious practices dictate the use of soy products.**

**Children who
require
formula
(cont'd)**

FMC: A child over the age of one year may need a FMC when milk and contract formulas are not tolerated, and a medical condition is chronic. The RD shall:

- Follow the same screening and approval steps as indicated above,
- Ensure all relevant medical conditions are coded on the ISIS summary screen and document the status of the medical condition, and the plan in the Individual Nutrition Education Plan (INEP) screen.
- Evaluate food intake and encourage compatibility and consistency with the FMC and/or refer the participant to the health care provider for Medical Nutrition Therapy (MNT), if necessary. The "WIC Recommendation for Medical Nutrition Therapy" form, DHS 4152 can be used for referral purposes.

When a FMC is used for an infant beyond the age of eighteen months (except for the religious or cultural reasons) and WIC is the sole payer, an MNT consult shall be requested to obtain a complete nutrition assessment and comprehensive plan. The consult should be requested through the health care provider and paid by the participant's health care plan. When the condition is chronic and severe, the participant may need additional assistance and advocacy in order to obtain appropriate treatment and to find a payer for the formula.

**Filing
paperwork**

Local agency staff shall file the prescription, the "Screening and Medical Justification of Formula for Medical Conditions" forms (DHS 4143/4144), denial letter from other payers and, if used, the "Request for Formula for Medical Conditions" form (DHS 4150) in a separate daily file or in a place that is readily accessible for audit purposes.

**Ordering
forms**

Local WIC staff may order the "Screening and Medical Justification of Formula for Medical Conditions," for infants or children (DHS 4143/4144) and the "Request for Formula for Medical Conditions" form (DHS 4150) in duplicate No Carbon Required (NCR) from the Office of State Printing (OSP) or in single copy format on the WIC web page at: www.wicworks.ca.gov.

**Monitoring –
formula for
medical
conditions**

The State WIC Branch participation reports include the percentage of infants receiving a FMC. During a Program Evaluation (PE) by the State WIC Branch, the team will review the usage rate and participant files for issuance of FMCs. The usage rate shall not exceed two percent for FMC paid by WIC. If a local agency exceeds either formula ceiling, additional training and/or technical assistance for the local agency staff will be required.